The MEDICAL MISSIONARY

Roger Van Der Weyden

St. Luke Painting the Virgin and Child

Vol. VI October, 1932 No. 1

REQUIESCAT IN PACE

CARDINAL VAN ROSSUM

CARDINAL VAN ROSSUM, Prefect of the Propaganda Fide has gone to his reward.

To a man whose life was full of labor, merit, and years, one must not begrudge his rest, but missionaries can not help but feel sad at this great loss. From his long and vast experience, he was familiar with all mission problems.

Our Society owes him a great and lasting gratitude. On one occasion, he conferred personally with the Holy Father about our Society. He also honored us with a letter and received our missionaries three times. We shall treasure his memory as one of the best friends of the Medical Mission Cause and of our Society in its humble beginnings.

THE SOCIETY OF CATHOLIC MEDICAL MISSIONARIES

THE Society of Catholic Medical Missionaries was founded in September, 1925, in Washington, D. C., with the approval of His Grace, Most Rev. M. J. Curley, D.D., Archbishop of Baltimore. The Society is designed to meet the need existing in all parts of the foreign mission field for Catholic medical women, willing to devote their life and profession to the service of the suffering millions in non-Christian countries.

It is intended for qualified women: doctors, dentists, nurses, pharmacists, dietitians and technicians, etc., who feel attracted to the religious life, and who wish to continue to practice their profession in the service of God as foreign missionaries. These will find ample scope for their generosity in the Society of Catholic Medical Missionaries, whose purpose is to render medical aid, no disease or condition being excepted, to Christians and non-Christians, and to bring the light and consolation of our Holy Faith to the people under their care.

The Society will also accept members who possess no medical qualifications, either with a view of training them in some branch of the profession after admission, or with a view to devoting themselves to non-medical work inevitably connected with the undertakings of the Society at home and abroad.

The requirements for admission are the same as for other religious communities.

The field of labor of the Society is not restricted to any one particular mission country. The Society conducts now two hospitals and training schools for Indian nurses; namely, the Holy Family Hospital, Rawalpindi, Punjab, and the Mitford Hospital, Dacca, Bengal; the Society also conducts two public health centers in Dacca.

Please address inquiries to Dr. Anna Dengel, Catholic Medical Mission House, Brookland, Washington, D. C., U. S. A.

The MEDICAL MISSIONARY

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THE WÜRZBURG YEARBOOK OF 1932

IN December of this year, the Medical Mission Institute of Würzburg, the only Catholic organization of its kind, will celebrate its tenth anniversary. It was founded by Rt. Rev. Msgr. P. C. Becker, S.D.S., on his return from Assam (India) where he had been Prefect Apostolic for seven years. That such an organization to supply doctors to the missions was not only timely but really necessary is proved by the astonishingly rapid development of the Institute. It has already send twelve doctors, among them three women, to the mission fields of Africa, China, and the Dutch Indies.

Whilst several mission orders and congregations have doctors and nurses among their numbers, there are at present only two organizations definitely in existence whose purpose it is to provide professional medical aid to the poor sufferers in the missions—the Medical Mission Institute of Würzburg and our Society (The Society of Catholic Medical Missionaries).

The members of the Würzburg Institute, composed of lay men and women, devote themselves to the study of medicine with the purpose of attaching themselves when qualified to some mission where a doctor is needed. Our Society is a religious community canonically erected in the Archdiocese of Baltimore and is for women only. Our purpose is to establish medical centers, such as hospitals, dispensaries, welfare clinics, etc., and to staff them. These will be not exclusively, but preferably, for women and children as the former at least depend entirely on women for medical aid in many mission countries—for religious and traditional reasons. In our Society we need women doctors, nurses and non-medical helpers for non-medical work necessarily associated with the carrying on of hospitals, etc. The hope of development does not lie in doctors and nurses who have already completed their studies, but in young women with a vocation who will study medicine or take up nursing precisely to be Medical Missionaries.

As individual vocations and needs in the missions vary, both the Würzburg Medical Mission Institute and our Society fill the gap.

Catholic Medical Mission literature is still very scant. A review of the Würzburg Yearbook will, therefore, help to show to the English-speaking world a little of the problems and doings of those who have dedicated themselves as Samaritans to a poor, helpless, suffering portion of humanity, to spread the Gospel of Love by deeds of mercy.

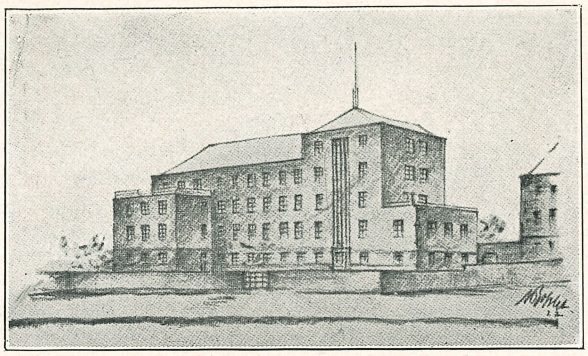
The Vocation of the Mission Doctor

The introductory article is written by O. F. Drexler, a pioneer member. "What do we want?" he asks. "What is the main anxiety for the Institute when members are sent out?" It is the question of their vocation. If they are called to it, then everything is safe. What lies hidden in the bud develops as time goes on. The Institute cannot creat vocations, but it can reorganize them and prepare them. Every member must decide truthfully in his or her innermost heart if there is a love for this vocation and if the intentions are pure and correspond to the seriousness of the undertaking. Every untruth in this respect against oneself brings unfailingly its penalty later. "Let us look at the missionary priest," he says. "He is a man who aims at sanctifying himself through his vocation. Should this be different for the mission doctor? Is it not the mission vocation which makes the mission doctor? Let us face facts clearly. The responsibility of the doctor is a great one; that of the mission doctor a double one. Everything is weighed twice: from the point of view of the medical profession, and from that of the mission. The conviction that the practice of our profession as mission doctors is the means given to us especially by God to work out our sanctification, is a powerful spur to make us persevere courageously. What should prevent us from considering our vocation in this light? Is it not the specific purpose of the mission vocation to bring others nearer to God? Why should we not apply our vocation first and foremost to ourselves? It is no use building castles in the air, to look forward perhaps, even in the smallest degree, to a life of variety or adventure. Let us not look on it as a temporary occupation, but as a vocation specifically ours. Let us ask ourselves if we have the intention to sanctify our lives through the medical mission vocation, so that we become better men. If the answer is, 'Yes,' there is no anxiety for the future—the mission doctor will then evolve himself. In the course of time problems of an interior and exterion nature are bound

to occur. To work them out and master them, we must look to the ascetically trained mission priests for example and help. Let us have no illusion. Let us apply the mission part of our work first to ourselves and let us seek in our vocation a means to lead a spiritual life; then our vocation will receive a refreshing savor and a stimulus to action, in short, a suitable nourishment which will guarantee perseverance. The problem of the mission doctor is equivalent to the problem of the spiritual life of the individual." In conclusion Dr. Drexler emphasizes that his remarks apply to the mission doctor and not to the doctor in the missions.

Medical Mission Work in South Africa

In her report of five years' of work in South Africa, Dr. Anna Heucamp says: "We can not wait till the natives come to us, we must go to them. Through these regular visits—300 to 400 in one week—I had ample opportunity to study the people, their housing, their poverty, their squalor, their moral misery, and their division into many sects. It also helped me in learning the language. I baptized many a child and sent the priest to the grown-ups. In the beginning the natives had many a laugh at my expense on account of my credulity and simplicity. The people pay a little for the medicine, as they do not value what is given free. Many used to come who had no money 'just today' but would bring it unfailingly 'tomorrow.' As the morrow never came, I became a little firmer with the result of fewer laughs at myself.



THE MEDICAL MISSION INSTITUTE, WURZBURG

"In South Africa there is a scarcity of doctors. There is only one for fifty or sixty thousand natives. It is difficult for a white doctor to live on the reservations for the natives and also to get a livelihood. The government intends to help natives to become doctors; how, is not decided yet, but it will take years before they will have a sufficient number of their own. There is also the question of the nurses, as white nurses do not want to be under native doctors. For a time at least, it will remain the duty of the white race to provide doctors for the natives. This is a magnificent field of labor for mission doctors who gladly make the sacrifice which work among natives requires and who are willing to be satisfied with less comfort and means."

An Important New Discovery for the Treatment of Malaria

Professor Mühlens, of the Tropical Institute of Hamburg, in an interesting and instructive article on the present treatment and prophylaxis of malaria, draws attention to the discovery of "atebrin." It is a synthetic preparation made by German chemists. It has already proved itself useful both alone and in combination with plasmochin.

Progress in the Treatment of Leprosy

Prof. H. Hoffmann, M.D., of the Finlay Institute in Havana, emphasizes the importance of the knowledge of the treatment of leprosy for mission doctors for in nearly all exotic countries these poor people are met with.

From times immemorial leprosy was considered an incurable disease. Those affected were doomed in the past to slow physical and mental decay. It was not only the disease, but social ostracism which made life particularly hard. On account of their repulsive looks, and the fear of contagion they were mostly segregated on distant islands or other ungetatable places where they were practically dead to the world. In China and India many lepers spend their lives in the street and among primitive people, they are sent into the desert where they die of starvation or they are killed.

Many are still under the impression that leprosy is incurable. In the early stages of the disease, however, it can be arrested if the proper remedies and a suitable mode of life are adopted. It is for this reason that doctors who go to the tropics should be familiar with the early symptoms and the best method of treatment. The patients can be dealt with in clinics where they get injections of chaulmoogra in its various forms, or other treatments, as often as required.

Professor Hoffmann concludes his article with the remark that science has conquered the worst terrors of leprosy and that the future promises to bring much relief and prevention.

Report of the Wurzburg Institute

His Eminence, Cardinal van Rossum, Prefect of the Propaganda Fide, honored the Director, Rt. Rev. Msgr. Becker with a letter in which he expressed his satisfaction in the untiring work of the Institute. "It is known," he said, "what a power Christian Charity is in the work of con-

version, therefore your meritorious Institute, which teaches how to help and to heal the body, works also at the healing of souls."

A number of students completed their studies and obtained the M.D. degree. Two Chinese students were also accepted during the year.

On the Feast of the Epiphany, several students took the mission oath and thereby became members of the Institute. At the end of the year there were 59 men and 18 women medical students, in addition to seven internes and seven doctors preparing themselves for future work.

One doctor and a nurse who is also trained obstetrically left for Abeokuta in Nigeria to take charge of the Sacred Heart Hospital founded by Rev. Father Coquard of the African Missions. For years he was the medical director himself. We are very glad that he succeeded, finally, in getting a suitable staff.

The Medical Mission Institute again sponsored a year's course for mission Sisters, after which they receive diplomas. Eight Sisters took the course.

AN OLD SORCERER OF THE TRANSVAAL, SOUTH AFRICA

Medical Mission Work in Flores

The Island of Flores, in the Dutch Indies, belongs to the Little Sunda Archipelago. "The climate," says Dr. Tietze, "is hot and the humidity high." This combination is trying to white people; the heart and nerves suffer, and physical effort is impossible over a long period.

The main food of the inhabitants is rice, maize, and a kind of bean. Rice is planted partly on dry land, and partly under water. The latter offers an excellent breeding place for anopheles, the malaria carriers. The above-mentioned bean contains a lot of vitamines, which explains why beriberi is unknown in Flores, although the population lives to a great extent on rice. As there is no mission hospital yet, Dr. Tietze conducts a number of dispensaries and does public health work. Malaria is the most common disease. From 90 per cent to 98 per cent of the people have an enlarged spleen. Malaria is particularly dangerous for infants and little children. In heavily infected areas, one finds many families who have lost all of their children, or whose remaining ones have degenerated into miserable little figures. Frequently, the women are sterile. The cause is often chronic malaria. Dr. Tietze mentions that so far he has found eight different varieties of malaria-carrying anopheles. The remedy lies, of course, in the extermination of the carriers, but this would require the draining of marsh land on a big scale and the regulation of rivers, all of which would devour enormous sums of money. There remains only to help the people with quinine. This is expensive and therefore it is not possible to treat everybody.

Another disease which formerly caused much misery is yaws. The effects of salvarsan are astounding. One injection, sometimes two, suffices in the case of a child to clear the skin entirely in a short time of the papules which covered the body from head to foot. On all journeys, the injections play a great rôle. It happened frequently that hundreds of people waited for the doctor at a certain place in order to get an injection. There would have been thousands but the expense was prohibitive.

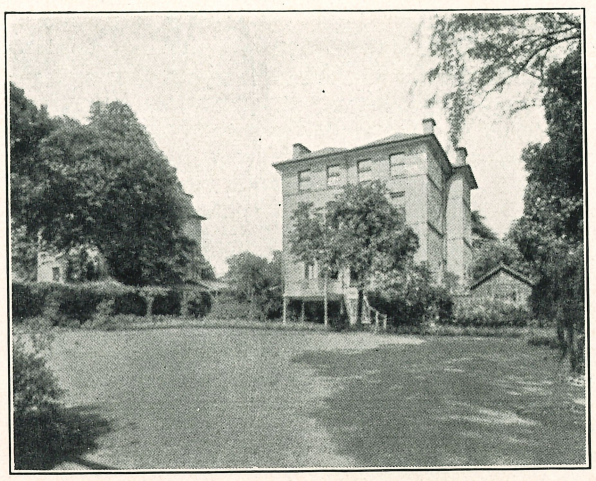
A third disease which claims many victims in Flores is bacillary dysentery. To conquer this scourge is difficult on account of the primitive and unhygienic mode of living of the natives. The specific serum therapy is out of the question as it is too costly.

Smallpox has become rare because vaccination is excellently organized. Two vaccinators travel from village to village and are obliged to report to the doctor, so that he knows at any time where they are at work and is able to control them. The necessary lymph is brought regularly every two weeks on the mail boats from the Pasteur Institute of Java.

Dispensary work here and there is not very satisfactory as the doctor is only able to visit a place once a month. Native male nurses are stationed there, but the patients have not the same confidence in them as in white people. Besides many cases can only be properly treated in a hospital which Dr. Tietze hopes will be built in a future not too remote.

(To be Continued)

THE SOCIETY AT HOME AND ABROAD



MATER CHRISTI MEDICAL MISSION HOUSE, THORNBURY RD., OSTERLY, LONDON — OUR MOST RECENT POSSESSION

THE main event since the appearance of the last magazine was the purchase and the opening of a house in England.

Househunting in such an interesting and vast city as London has its charms, its fatigues and its problems. To find the right house in the right place at a reasonable price is almost like finding a needle in a haystack. After a few weeks' search, we found, providentially, just what we wanted. So we did not lose time to decide. Everything was favorable, except that the house would not be vacant till the end of August, and we had to leave the country house in July! What to do? Miss Willis came to the rescue again. As she moved into her country house, she put her house in the city at our disposal and thereby saved us a lot of worry and expense. On August 24, we were able to take up our abode in our own house. Our first recruits in Europe had the joys of moving as we had in Washington. It is a good omen —as it tests the patience and adaptability required for missionary life.

The house is in Osterly, not far from the famous Campion House, where late vocations to the priesthood are fostered under the enthusiastic direction of Rev. Father Lester, S.J. It is roomy and there is a garden, not large, but nice. The Vincentian Fathers who are in the neighborhood kindly agreed to say Mass in our chapel. Thanks to the Tabernacle Society at Notre Dame Academy in Boston, and other friends, we have the necessary altar vessels and vestments. An altar has also been donated by a convert in thanksgiving for the gift of faith.

The house we bought was, of course, a complete vacuum. Furnishing, even in the simplest way, costs money, and money is extremely scarce. Fortunately, we received most of the essentials, such as dishes, tables and chairs, a clock, a sewing machine, blankets, etc.

It is really impossible to express in words our gratitude to our benefactors who helped us to buy and to furnish the house and helped in other ways to take this step forward. We know that it meant sacrifice on their part, but they are convinced as we are, that the Medical Apostolate is a corporal and spiritual work of mercy and therefore worth sacrifices—even great ones. Did not Our Lord Himself teach it to us in His parable of the good Samaritan? To inconvenience oneself for a poor stranger lying by the roadside wounded and helpless, and to pay for him even to be taken care of, meant inconvenience and sacrifice and yet Our Lord said: "Do thou likewise." Our consolation is that those who help us in our work for the sick, either directly or indirectly, will receive their reward from God whose generosity cannot be exceeded.

The address of the house is:

Mater Christi Medical Mission House,
Thornbury Rd.,
Osterly, London.

Dr. Dengel is on her way to India. She will remain a short time in Rome, en route, where the General Chapter of the Society is being held. Dr. Dengel's address in India will be: Holy Family Hospital, Rawalpindi, India.

RAWALPINDI

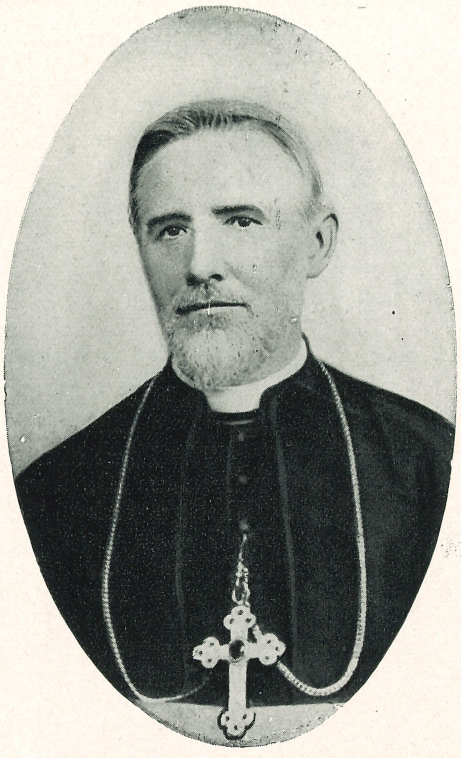
In August, the building for the members of the Society and the native nurses was completed. Up to the present, they were lodged in the hospital. This new addition will be a great boon, as now more space is available for the patients.

DACCA

Another unfortunate murder of an English official took place, committed this time by a 12-year-old boy. Sister M. Helen and Sister M. Frances nursed the poor man in the Mitford Hospital.

OUR PILGRIM

The Editor met "our pilgrim" and his mother at the Eucharistic Congress in Dublin. It was a joy to see them so happy and delighted and to arrange the journey to Lourdes. It just so happened that there was a pilgrimage from Liverpool to Lourdes, which made it better and easier in every way. Mrs. Buckley and Dannie were privileged to witness a miracle in Lourdes. We are confident that Our Lady also heard our pilgrim's prayers for our intentions.



HIS EXCELLENCY RT. REV. BISHOP CROWLEY

WASHINGTON

His Excellency Rt. Rev. Timothy Crowley, C.S.C., Bishop of Dacca, Bengal, honored us by celebrating Holy Mass in our chapel and offering it up for our community in India, England, and America.

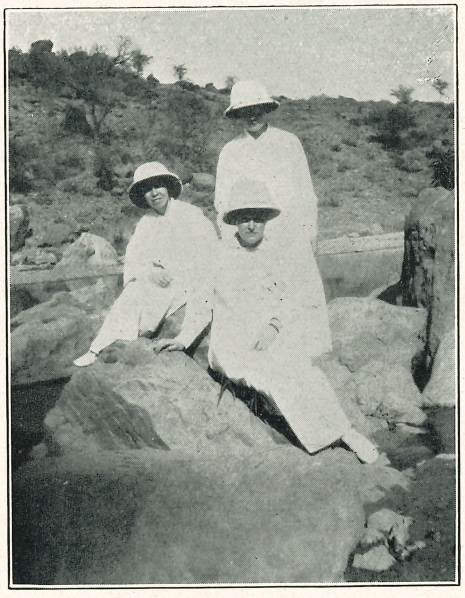
His Excellency gave us first-hand information about the activities and endeavors of our missionaries stationed in Dacca. It was very encouraging to hear that in the short time they have been there some of their efforts have been fruitful. In his account of mission conditions in general in the promising field of Bengal, emphasis was laid on the need for *more* trained workers to replace those whose health is undermined, for the Indian climate is very enervating, as well as to augment present forces.

Rev. Charles Finner, C.S.C., who for the past 15 years has labored for souls in the missions of Bengal gave us a delightful hour, relating many varied and interesting experiences of his apostolic work while in India.

Through the kindness of Rev. Edward P. McAdams, pastor of St. Joseph's Church, who put his camp at our disposal, the Medical Missionaries were able to spend ten very happy days at North Beach on the Chesapeake Bay. After ten months of study and work, this relaxation was greatly appreciated. All returned tanned and feeling rested and refreshed.

Sister M. Xavier Boeckmann, formerly of Arkansas, was transferred from our Washington headquarters to our new London foundation. She will augment our staff there and will sail from thence to India at some future date.

The first Sunday of September closed our annual eight-day retreat for all at the Motherhouse. The exercises were conducted by V. Rev. George Marr, C.S.C., Superior of the Holy Cross Foreign Mission Seminary here. During these days of prayer, our retreatants were mindful of the intentions of the benefactors and friends of the Society.



VACATION DAYS IN THE HILLS

ST. TERESA'S BOOKMARK

Let nothing trouble thee. Let nothing frighten thee.
All things pass away. God never changes.
Patience obtains all things. Nothing is wanting to him who possesses God.
God alone suffices.

"THE CITY OF GOD"

The History and Life of the Virgin Mother of God Manifested to Ven. Mary of Jesus of Agreda

"The City of God" is a remarkable book, approved by Pius XI and recommended by Cardinals and Bishops. It contains a series of instructions dictated word for word by Our Lady to her servant, Blessed Mary of Agreda, a Spanish nun, whose body is still incorrupt after 250 years. It was translated from the Spanish by Rev. George Blatter, the author of the article on Afghanistan.

"The City of God," attractively bound, may be obtained in four volumes at $2.50 each, or in an abridged form at $3.00, from the Medical Mission House, Brookland, Washington, D. C.

FOR THOSE WHO ARE OTHERWISE WELL

There is a peculiar malady which attacks very many people. The symptoms are clear enough but they were never so set out as to enable sufferers to examine the disease for themselves. That has now been done. The "Living Church" gives the symptoms of *morbus sabbaticus:*

Morbus Sabbaticus or Sunday Sickness, is a disease peculiar to church-goers. The attack comes on suddenly every Sunday. No advance symptoms are felt. On Saturday night the patient sleeps well. On Sunday he eats a hearty breakfast, but about church time an attack comes on, and continues until all services are over in the morning. The patient feels easy and eats a hearty dinner. In the afternoon he feels much better and is able to take a walk and talk about golf and politics.

About evening church-time he gets another attack, and stays at home. He retires early—sometimes—sleeps well, and wakes up on Monday morning refreshed and able to go to work, and does not have any symptons of the disease until the following Sunday.

The peculiar features of the disease are:

1. It always attacks professing church people.
2. It never makes its appearance except on Sundays.
3. The symptoms vary, but it never interferes with sleep or appetitie.
4. It never lasts more than twenty-four hours.
5. No physician is ever called in.
6. It is becoming painfully prevalent and is alarmingly contagious.
7. No remedy is known for it except prayer.
8. Unless checked, it always proves fatal in the end—to the soul.

—From *The Rock.*

REQUIESCAT IN PACE

In the death of His Excellency Rt. Rev. George Finnigan, C.S.C., Bishop of Helena, Mont., we have suffered the loss of a true friend. Bishop Finnigan honored us by presiding at one of our departure ceremonies.

May we ask our readers to join us in praying for him.

CAUSA NOSTRAE LAETITIAE

Mary, by Her Motherhood,
Brought forth Joy; and Joy was good.
Joy that found its mystic spring
In a Maiden's mothering.

Joy within the maiden's heart
Lured her from the world apart,
Bidding her her hands uplift
In thanksgiving for the gift.

Lured her onward till she stood
At the feet of—Motherhood
Where the neediest human thing
Called for Mary's mothering.

Mary, cause of all our joy,
Pray for those in Love's employ,
And be Thou, at evening's close
Mother of their heart's repost.

—ENID DINNIS.

MEDICAL MISSION DAY

The Feast of St. Luke, October 18, has been designated as "Medical Mission Day" by the Catholic Medical Mission Board of New York City. This day has been set aside as a day on which our Catholic people are asked to pray to God through St. Luke, "the good physician," to bestow His blessings on those who devote themselves to the care of the sick, on those under their care, and also for all those who in any way are assisting in the alleviation of suffering in mission countries.

THE PATRONESS OF MISSIONARIES

On October 3 falls the Feast of St. Therese of the Child Jesus. She, who said, "There can be no rest for me until the end of the world, when the Angel shall have said: 'Time is no more,' then I shall rest, then I shall be able to rejoice, because the number of the elect will be complete," she is lovingly watching over and assisting missionaries in fields at home and afar in their undertakings. Not until we are within the realms of eternity will we know all the influence she exercised and all the conversions wrought because of her zeal while in Carmel and through her powerful intercession after her entrance into the heavenly court.

Promote Medical Missions by subscribing to "The Medical Missionary." Subscription $1 a year. Address, The Medical Missionary, Brookland, Washington, D. C. Telephone Decatur 3161.

The Special Mission Intention of the Apostleship of Prayer for October is: The Pontifical Society of St. Peter for Native Clergy.